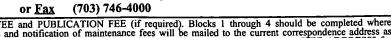
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for addressing the property of the property maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) 7590 04/30/2004 Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below. Michael F. Scalise Hodgson Russ LLP **Suite 2000** One M&T Plaza (Depositor's name) Buffalo, NY 14203-2391 <u>Rosemarie Contella</u> (Signature (Date) May 21, 2004 ATTORNEY DOCKET NO CONFIRMATION NO. FILING DATE FIRST NAMED INVENTOR APPLICATION NO. 5648 04645.0896 10/037 133 12/27/2001 Esther S. Takeuchi TITLE OF INVENTION: SILVER VANADIUM OXIDE HAVING LOW INTERNAL RESISTANCE AND METHOD OF MANUFACTURE DATE DUE ISSUE FEE **PUBLICATION FEE** TOTAL FEE(S) DUE APPLN, TYPE SMALL ENTITY 07/30/2004 \$300 \$1630 \$1330 nonprovisional NO CLASS-SUBCLASS **EXAMINER** ART UNIT CHANEY, CAROL DIANE 1745 429-219000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the Michael F. Scalise names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Wilson Greatbatch Technologies, Inc. 9645 Wehrle Drive Clarence, NY 14031 individual 😰 corporation or other private group entity Please check the appropriate assignee category or categories (will not be printed on the patent); 4b. Payment of Fee(s): 4a. The following fee(s) are enclosed: ☐ A check in the amount of the fee(s) is enclosed. ☐ Issue Fee ☑ Payment by credit card. Form PTO-2038 is attached. Publication Fee The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). ☐ Advance Order - # of Copies Deposit Account Number \_ 502460

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F May 21, 2004 Michael (Date) (Authorized Signature) NOTE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone or other party in

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